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CONFIRMATION NO. 7516

SERIAL NUMBER 10/830,034	FILING OR 371(c) DATE 04/23/2004 RULE	CLASS 128	GROUP ART UNIT 3771	ATTORNEY DOCKET NO. IMED-0009-US	
APPLICANTS Thomas J. Wood, Blackshear, GA; ** CONTINUING DATA ***** <i>TKM</i> This appln claims benefit of 60/501,028 09/09/2003 and claims benefit of 60/492,282 08/05/2003 ** FOREIGN APPLICATIONS ***** <i>TKM</i> IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY ** ** 06/26/2004					
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <i>TKM</i> Examiner's Signature <i>TKM</i> Initials <i>TKM</i>		STATE OR COUNTRY GA	SHEETS DRAWING 3	TOTAL CLAIMS 33	INDEPENDENT CLAIMS 3
ADDRESS 40575					
TITLE Nasal ventilation interface and system					
FILING FEE RECEIVED 567	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		